

# Request for One-Time Transfer of Alcoholic Liquor

To: Illinois Liquor Control Commission

From: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Date: \_\_\_\_\_

Reason for Request: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Pursuant to Section 100.250 of the ILCC Rules and Regulations, please consider this request to allow the one-time transfer of alcoholic liquor between the licensed premises listed below. Attached please find a detailed inventory of the alcoholic liquor products to be transferred.

The transfer is scheduled to occur on \_\_\_\_\_.

## FROM:

Store: \_\_\_\_\_

Store: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

STATE LIC. NO.: \_\_\_\_\_

STATE LIC. NO.: \_\_\_\_\_

## TO:

Store: \_\_\_\_\_

Store: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

STATE LIC. NO.: \_\_\_\_\_

STATE LIC. NO.: \_\_\_\_\_

A detailed inventory must be included with this form. The inventory must include locations ("to" and "from"), the product brand name(s), container sizes, and number of containers.

Fax inventory with this request to: 312-814-2241 (Attn: Mary McNulty).

If more than 5 pages, send via email to [mary.mculty@illinois.gov](mailto:mary.mculty@illinois.gov)  
(or by regular mail to: ILCC, 100 West Randolph, Suite 7-801, Chicago, IL 60601).